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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>Tea Party Patriots Citizens Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00540898</span> </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; gap: 10px; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">MM / DD / YY 02 / 18 / 2016</div> </div>	

Full Name of Payee <b>Victory Media Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2016	
Mailing Address 1701 East Lake Ave. Ste. 335		Amount 10000.00	
City Glenview	State IL	Zip Code 60025	<b>Transaction ID : SE.493059</b> Date of Disbursement or Obligation MM / DD / YYYY 02 / 18 / 2016
Purpose of Expenditure Telemarketing	Category/ Type 001		
Name of Federal Candidate Rafael Edward "Ted" Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought	10000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee L2 Political		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2016	
Mailing Address 2500 116th Ave. NE		Amount 13888.89	
City Bellevue	State WA	Zip Code 98004	Transaction ID : SE.493060 Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2016
Purpose of Expenditure List Rental	Category/ Type	001	
Name of Federal Candidate Rafael Edward "Ted" Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought	23888.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	23888.89
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures.....	▶	23888.89

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Mr. Paul A Kilgore*

*[Electronically Filed]*

Date \_\_\_\_\_

Signature

FEC Schedule E (Form 24/28) Rev. 09/2013